	٠.	-	RE	(Colun	TILEU - PAR	T1			i		101	718, 12
120	λόφ	BASIC FEE	6(a)).	NUMBER		(Column 2		1	LL ENTITY	OR '	01	HER THAN
1	**	TOTAL CLAIMS (37 CFR 1.16(c))  (NDEPENDENT CLAIMS (37 CFR 1.16(b))  (37 CFR 1.16(b))  (37 CFR 1.16(b))				5		RATE 5		OR	RATE	
		MULTIPLE DEPENDENT CLAIM PRESENT (37 CER 1 150)						x s 100 <u>.</u> + s 180.		OR OR	x s <u>50</u> . x s <u>200</u>	250
		"If the difference in column 1 is less than zero, enter "0" in column 2.  CLAIMS AS AMENDED - PART II						FOTAL		OR OR	+ 360	1650
		Total  Total  O CIT CFR 1.16  A Independent  OI CFR 1.16  FIRST PRES	ભા ત (ત્લા	MS VING ER - MENT Minu Minu	s ····	R PRESER	NT X	SMALL & RATE	FIONAL FEE		OTHER SMALL E RATE	ENTITY  ADDITIONAL FEE
	AMENDMENTR	COlumn CLAII REMAIN REMAIN AFTE AMENDN CI CRR LIECTI COLOR C		S (Colur NG HIGHE NUMBL PREVIOL PAID FO Minus		in 2) (Column 3)  OT R PRESENT SLY EXTRA R =	70 A00	11	ADDI- IONAL FEE	OR +s	ATE T	ADDI FIONAL FEE
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	SH.	Total (11 OPR LIGGII Indépendent (11 OPR LIGGII	AFTER AMENOMENT	Minus -	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	x s 2		MAL	RAT	T(0)	DOI: NAL EE
.  -	• (	the entry in co	ATION OF MULTIPE lumn 1 is less that umber Previously umber Previously mber Previously f	In the not-		+ s 10 + s 180 TOTAL ADO'L FI	D <u>.</u>	OR . OR	+ 300 + 300 TOTAL ADO'L FE	Q 		

The Highest Number Previously Paid For In THIS SPACE is less than 3, enter '3'.

The Highest Number Previously Paid For Internation is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any complete, and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 223113-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS